Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

DOG 0 42/ --- 1

Enective January 1, 2005						<u>:</u>		144 E	CCZ	1077		
CLAIMS AS			GEL <b>ED -</b> (Column			mn 2)		SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			20					RATE	FEE		RATE	FEE
FOR			NUMBER F	ILED	NUMB	ER EXTRA		BASIÇ FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			20 min	nus 20= * +			X\$ 9=	0	OR	X\$18=		
INDEPENDENT CLAIMS			3 mir	inus 3 =  * 🖒				X42=	0	OR	X84=	:
MULTIPLE DEPENDENT CLAIM PE			RESENT					+140=	6	OR	+280=	
* If the difference in column 1 is less-than zero, enter "0" in column				olumn 2		TOTAL	3.75	OR	TOTAL			
GColumn 1) (Column 2) (Column 3)					<u>.</u> . <u>.</u>	SMALL	ENTITY	OR	OTHER SMALL I			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON TO	otal	. 17	: us	** &	00	= 0		X\$ 9=		OR	X\$18=	
AME	dependent	* H NTATION OF M	il riple per	*** L	F CLAIM	[= ()		X42=		OR	X84=	
	ino i Pricoci	VIATION OF IA	CLIFTE DEF	ENDEN	CLANV		ן נ	+140=		OR	+280=	
· .								TOTAL ADDIT FEE		OR	TOTAL ADDIT, FEE	
	(Column 1) (Column 2) (Column 3										7,0011,122	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO TO	otal	A .	,' mus	**		=	╛	X\$ 9=	: . ·	OR	X\$18=	
AME	ndèpendent	NTATION OF M	itainus	***	CL AIM	]=	11	X42=		OR	X84=	
	INGT PNEOU	NIAHON OF M	ACTIF EL OLF	LINDEN	CEAIN		_ [	+140=		OR	+280=	
							7	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)	· 37		mn 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO TO	otal ·		tainus	**		= .	] [	X\$ 9=		OR	X\$18=	
ME	ndependent	*	Minus	***		=		X42=			X84=	
F	IRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		J∮	<del>,                                    </del>		OR		
* 1f 1)-	ne entry in color	nn 1 is less than t	try in colu	mn 2 write	e "O" in co	olumn 3	l	+140=		OR	+280=	
**   [ 1]	<b>he "</b> Highest Nor <b>he "Hi</b> ghest t!o	mber Previously F mber Previously F ber Previously F	IHT AL SCOTT	S SPACE S SPACE	is less that	an 20, enter "20 an 3, enter "3." e highest numb	•	TOTAL ADDIT, FEE and in the app	propriate bo	OR	TOTAL ADDIT. FEE dumn 1.	

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	Епе	Rive January 1, 20		MAY EAZO						
CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS		20		RATE	FEE		RATE	FEE		
FOR		NUMBER FILED	NUMBER EXTRA	BASIÇ FEE	375.00	OR	BASIC FEE	750.00		
то	TAL CHARGEABLE CLAIMS	Z0 minus 20=	• 0	X\$ 9=	0	OR	X\$18=			
IND	EPENDENT CLAIMS	minus 3 =	0	X42=	0	OR	X84=			
ΜU	LTIPLE DEPENDENT CLAIM	PRESENT		+140=	0	OR	+280=			
* If the difference in column 1 is less-than zero, enter "0" in column 2					3.75	OR	TOTAL			
2	CLAIMS AS	SMALL	ENTITY	OR	OTHER SMALL					
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMEN	NUM PREVI	HEST HBER PRESENT OUSLY EXTRA FOR	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
MON	Total * 17	Minus	() =	X\$ 9=		OR	X\$18=			
AME	Independent + 3	Minus ***	3 =	X42=		OR	X84=			
	FIRST PRESENTATION OF	MULTIPLE DEPENDEN	I CLAIM	+140=		OR	+280=			
;	1 1			TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE			
	01606 (Column 1	(Colu	mn 2) (Column 3)				70011.1 EE	·		
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMEN	HIGH NUM PREVI	HEST HBER PRESENT OUSLY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDM	Total * 17	Minus **	<i>20 = 0</i>	X\$ 9=	0	OR <sup>1</sup>	X\$18=			
AME	Independent + L	Minus	3 = 1	X42=	100	or	X84=			
-	- PRESENTATION OF	MOLTIFEE DEFENDEN	T CLAIM	+140=	0	OR	+280=			
0	101/11	<i>2</i> o o .		TOTAL ADDIT. FEE	100	OR	TOTAL ADDIT. FEE			
4	26/06 (Column 1		mn 2) (Column 3)	<u>)</u>						
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMEN	NUM PREVI	HEST MBER PRESENT HOUSLY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NDW	Total *	Minus **	10 = 0	X\$ 9=		OR	X\$18=			
AME	Independent * 4	Minus *** L	T CLAIM	X42=	X	OR	X84=			
	<u> </u>			+140=		OR	+280=			
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.									

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Effec	ENTREGRESS!							
CLAIMS A	SMALL ENTITY OTHER THAN							
TOTAL CLAIMS	20		RATE	FEE		RATE	FEE	
FOR	NUMBER FILED	NUMBER EXTRA	BASIÇ FE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS	Z0 minus 20=	. 40	X\$ 9=	0	OR	X\$18=		
INDEPENDENT CLAIMS	7 minus 3 =	-0	X42=	0	OR	X84=	·	
MULTIPLE DEPENDENT CLAIM F	PRESENT	+140=	0	OR	+280=			
* If the difference in column 1 is	"0" in column 2	TOTAL	375	OR	TOTAL			
2/1/05 CLAIMS AS A (Column 1)	OTHER I							
CLAIMS REMAINING AFTER AMENDMENT  Total * 1  Independent * 3	HIGH NUM PREVIO PAID	BÉR PRESENT DUSLY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total * 17	Minus **	0 = 0	X\$ 9=		OR	X\$18=		
Independent + 3	Minus ***	3 = 0	X42=	X	OR	X84=		
FIRST PRESENTATION OF M	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+280=		
. / /	. *		TOTAL		OR	TOTAL ADDIT, FEE		
H(1,105 (Column 1)	. (Calu	mn 2) (Column 3)	ADDIT. FEE	<del></del>	1	ADDIT. I EE		
CLAIMS REMAINING AFTER AMENDMENT Total Independent *	HIGH NUM PREVI	HEST	PATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
WON Total *	Minus **	00 = 0	X\$ 9=		OR	X\$18=		
Independent + S	Minus +**	5  = 0	X42=		OR	X84=		
PINST PRESERVATION OF W	TOTAL CE DEL CIODEN		+140=	1	QR	+280=		
1.1.			TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1)		mn 2) (Column 3)	/					
CLAIMS REMAINING AFTER AMENDMENT  Total * 17  Independent * 3	NUM PREVI	HEST HBER PRESENT OUSLY EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total *	Minus ** 🔾	20 = 0	X\$ 9=		OR	X\$18=		
Independent * 3	Minus ***	3  = O	X42=	X	OR	X84=		
FIRST PRESENTATION OF I	MOLTIPLE DEPENDEN	1 CLAIM	+140=		OR	+280=		
* If the entry in column 1 is less than ** If the "Highest Number Previously			TOTAL	1	OR	TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.								